
State:	District of Columbia	Filing Company:	The Cincinnati Life Insurance Company
TOI/Sub-TOI:	LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other		
Product Name:	2019 LTC Rescission & Suitability Reports		
Project Name/Number:	2019 LTC Rescission & Suitability Reports/2019 LTC Rescission & Suitability Reports		

Filing at a Glance

Company:	The Cincinnati Life Insurance Company
Product Name:	2019 LTC Rescission & Suitability Reports
State:	District of Columbia
TOI:	LTC06 Long Term Care - Other
Sub-TOI:	LTC06.000 Long Term Care - Other
Filing Type:	Form
Date Submitted:	02/07/2020
SERFF Tr Num:	GRJR-132237275
SERFF Status:	Assigned
State Tr Num:	
State Status:	
Co Tr Num:	2019 LTC RESC SUIT
Implementation	On Approval
Date Requested:	
Author(s):	Sheana Roginski, Cindy Stubblefield, Paula Gentry, Jeannine Williams
Reviewer(s):	Colin Johnson (primary), RaShaunda Benson
Disposition Date:	
Disposition Status:	
Implementation Date:	

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General Information

Project Name: 2019 LTC Rescission & Suitability Reports Status of Filing in Domicile: Pending
Project Number: 2019 LTC Rescission & Suitability Reports Date Approved in Domicile:
Requested Filing Mode: Informational Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type:
Overall Rate Impact: Filing Status Changed: 02/07/2020
State Status Changed:
Deemer Date: Created By: Cindy Stubblefield
Submitted By: Cindy Stubblefield Corresponding Filing Tracking Number:

Filing Description:
NAIC: #0244-76236

Subject:
The Cincinnati Life Insurance Company
Long Term Care Suitability and Rescission

Dear Sir or Madame:

Please be advised that for the reporting year 2019, we have no Rescissions or Suitability to report.

Thank you for your usual courtesy and cooperation.

Company and Contact

Filing Contact Information

Cindy Stubblefield, Filing Analyst III cindy.stubblefield@cinfin.com
6200 Glimore Rd 513-603-5353 [Phone]
Fairfield, OH 45014

Filing Company Information

The Cincinnati Life Insurance Company	CoCode: 76236	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name:	State ID Number:
(513) 603-5563 ext. [Phone]	FEIN Number: 31-1213778	

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:

SERFF Tracking #:	GRJR-132237275	State Tracking #:		Company Tracking #:	2019 LTC RESC SUIT
State:	District of Columbia	Filing Company:	The Cincinnati Life Insurance Company		
TOI/Sub-TOI:	LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other				
Product Name:	2019 LTC Rescission & Suitability Reports				
Project Name/Number:	2019 LTC Rescission & Suitability Reports/2019 LTC Rescission & Suitability Reports				

Supporting Document Schedules

Satisfied - Item:	2019 LTC Rescission Report
Comments:	
Attachment(s):	DC 2019 NAIC Rescission Appendix A Fillable.pdf
Item Status:	
Status Date:	
Satisfied - Item:	2019 LTC Suitability Report
Comments:	
Attachment(s):	DC 2019 NAIC Suitability Fillable.pdf
Item Status:	
Status Date:	

APPENDIX A

**RESCISSION REPORTING FORM FOR
LONG-TERM CARE POLICIES
FOR THE STATE OF District of Columbia
FOR THE REPORTING YEAR 2019**

Company Name: The Cincinnati Life Insurance Company
 Address: PO Box 145496
Cincinnati, Ohio 45250-5496
 Phone Number: 513-603-5353

Due: March 1 annually

Instructions:

The purpose of this form is to report all rescissions of long-term care insurance policies or certificates. Those rescissions voluntarily effectuated by an insured are not required to be included in this report. Please furnish one form per rescission.

Policy Form #	Policy and Certificate #	Name of Insured	Date of Policy Issuance	Date/s Claim/s Submitted	Date of Rescission
0	0	0	0	0	0

Detailed reason for rescission: _____

Cindy Stubblefield

Signature

Life Filings Analyst Supervisor

Name and Title (please type)

February 6, 2020

Date

**Suitability Reporting Form
Long-Term Care Insurance**

For the State of District of Columbia

For the Reporting Year of 2019

Company Name: The Cincinnati Life Insurance Company

Company Address: PO Box 145496, Cincinnati, Ohio 45250-5496

Company NAIC Number: 0244-76236

Contact Person: Cindy Stubblefield Phone Number: 513-603-5353

Instructions

The purpose of this form is to report all long-term care activity related to the total number of applications received from residents of this state, the number of those who declined to provide information on the personal worksheet, the number of applicants who did not meet the suitability standards, and the number of applicants who chose to confirm after receiving a suitability letter.

- | | | |
|----|--|----------|
| 1. | Total Number of Applications Received from Residents of <u>0</u> | <u>0</u> |
| 2. | Number of Applicants Who Declined to Provide Information on the Personal Worksheet | <u>0</u> |
| 3. | Number of Applicants Who Did Not Meet the Suitability Standards | <u>0</u> |
| 4. | Number of Applicants Who Chose to Confirm After Receiving a Suitability Letter | <u>0</u> |



Signature

Cindy Stubblefield, Life Filings Analyst Supervisor

Name and Title (please type)

February 6, 2020

Date